P 20. BFI ASSESSMENT TOOL: A QUEBEC METHODOLOGY TO ASSESS COMPLIANCE WITH BREASTFEEDING-RELATED POLICIES AND PRACTICES IN HEALTH CARE FACILITIES

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Introduction: Since 2001, the public health authority of Québec's Montérégie region has developed and tested an innovative methodology to assess institutional compliance with breastfeeding-related policies and practices proposed by Baby-Friendly Initiative (BFI). To facilitate the assessment, successive improved versions of a bilingual informatised tool have been used. The tool includes questionnaires and observation grids to assist data collection from different sources as well as tables and graphs to present assessment results. Methodology: Using the perspective of mothers, staff/administrators and an observer, the tool measures the extent of implementation of a set of indicators for each of the initiative's Ten Steps for maternity units, Seven Points for community health centers (CHC) and the International Code of Marketing of Breastmilk Substitutes (Code). In order to provide health care facilities with a summary measure, three synthetic indexes were constructed, ranging between 0 and 10 for hospitals, 0 and 7 for CHC, and 0 and 1 for the Code. The methodology has been used repeatedly in the Montérégie region. Baseline assessments were performed in 2001 for the 9 hospitals and in 2005 for the 19 CHC. Follow-up measures were performed in 2004 and 2007 for hospitals and in 2007 for CHC. Results: Among participating hospitals, the Ten Steps scores varied, in 2001, between 2.4 and 7.0 and, in 2004, between 3.0 and 8.2, with improvements in the score in 8 out of 9 hospitals. Among CHCs, baseline Seven Points scores varied between 2.0 and 5.4. Finally, taking into considerations all assessments, Code scores varied between 0.3 and 1.0. Results from the 2007 measurement will also be presented. Conclusions: Use of this methodology in Quebec's 2nd largest sociosanitary region has allowed personalized, timely feedback of results to administrators and staff and seems to have spurred a mobilization of local

key-players facilitating the adoption of breastfeeding-related best practices. Furthermore, the methodology is adaptable to multiple settings and can be used for training, monitoring, research, quality improvement, policy/ program evaluation, or preparation for BFI certification or recertification